

REQUEST FOR QUOTATION (THIS IS NOT AN ORDER)		THIS RFQ <input type="checkbox"/> IS <input checked="" type="checkbox"/> IS NOT A SMALL BUSINESS SET ASIDE		PAGE 1 OF 1 PAGES	
1. REQUEST NO. RFQ-RT-12-00160		2. DATE ISSUED 08/22/2012	3. REQUISITION/PURCHASE REQUEST NO. PR-ORD-12-00930		4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG.1
5a. ISSUED BY RTPPOD US Environmental Protection Agency 109 T.W. Alexander Drive Mail Code: E105-02 Research Triangle Park NC 27709			6. DELIVERY BY (Date) 04/25/2012		
5b. FOR INFORMATION CALL: (No collect calls)			7. DELIVERY <input type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)		
			9. DESTINATION		
a. NAME OF CONSIGNEE ORD/NERL/MCEARD			b. STREET ADDRESS Office of Research and Development 26 West Martin Luther King Drive		
NAME Jacqueline Sayles			TELEPHONE NUMBER AREA CODE 919 NUMBER 541-4826		
8. TO:			c. CITY Cincinnati		
a. NAME			b. COMPANY		
c. STREET ADDRESS			d. STATE OH		
d. CITY			e. ZIP CODE 45268		
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date) 08/27/2012 1200 ET			IMPORTANT: This is a request for information, and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5a. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or services. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotations must be completed by the quoter.		
11. SCHEDULE (Include applicable Federal, State and local taxes)					
ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
0001	DNA Sequencing with Genome Assembly of 175 samples. Quote #USEPA-JSD2012-2.				
12. DISCOUNT FOR PROMPT PAYMENT		a. 10 CALENDAR DAYS (%)	b. 20 CALENDAR DAYS (%)	c. 30 CALENDAR DAYS (%)	d. CALENDAR DAYS NUMBER PERCENTAGE
NOTE: Additional provisions and representations <input type="checkbox"/> are <input type="checkbox"/> are not attached					
13. NAME AND ADDRESS OF QUOTER			14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15. DATE OF QUOTATION
a. NAME OF QUOTER			16. SIGNER		b. TELEPHONE
b. STREET ADDRESS					
c. COUNTY			a. NAME (Type or print)		AREA CODE
d. CITY			c. TITLE (Type or print)		NUMBER
e. STATE			f. ZIP CODE		
AUTHORIZED FOR LOCAL REPRODUCTION Previous edition not usable					
STANDARD FORM 18 (REV. 6-95) Prescribed by GSA - FAR (48 CFR) 53.215-1(a)					